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FORM TO BE USED BY A PRISONER FILING A COMPLAINT
UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983

MAY 15 2013

AT BALTIMORE
CLERK, U.S. DISTRICT COURT
DISTRICT OF MARYLAND

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND

BY

DEPUTY

Joseph L. Baumgarten III #363691

MRDC

550 E. Madison St.

Balto, MD 21202

(Full name, prison identification
number and address of the plaintiff)

v.

Civil Action No. JFM-13-1446
(Leave blank on initial filing to be filled in by Court.)

MD. Division of Corrections

K. Upshaw

550 E. Madison St.

Balto, MD 21202

(Full name and address of the defendant(s))

COMPLAINT

I. Previous lawsuits

- A. Have you filed other cases in state or federal court dealing with the same facts as in this case or against the same defendants?

YES ☐

NO ☒

- B. If you answered YES, describe that case(s) in the spaces below.

1. Parties to the other case(s):

Plaintiff: _____

Defendant(s): _____

2. Court (if a federal court name the district; if a state court name the city or county): _____
3. Case No.: _____
4. Date filed: _____
5. Name of judge that handled the case: _____
6. Disposition (won, dismissed, still pending, on appeal): _____

7. Date of disposition: _____

II. Administrative proceedings

- A. If you are a prisoner, did you file a grievance as required by the prison's administrative remedy procedures?

YES ☐ NO ☒

1. If you answered YES:

a. What was the result? _____

- b. Did you appeal?

YES ☐ NO ☒

2. If you answered NO to either of the questions above, explain why:

Since I came here on 5/8/13 I could not and still have not received any A.R.P.'s. I have asked Every Day Since I Been here. Officer Oliver / officer Butler.

III. Statement of claim

(Briefly state the facts of your case. Include dates, times, and places. Describe what each defendant did or how he/she is involved. If you are making a number of related claims, number and explain each claim in a separate paragraph.)

(1) Officer upshaw on 5/8/13 ripped the cover off of my chumash. Stating that I was not allowed to have a hard Back Cover here.

(2) I am jewish and require a kosher meal, Since I've been here I have not received a kosher meal and have been told to write Chaplin wallace which I have ^(3 times) ~~here~~ here it is the 13th of may and I have been being Starved. all I want is a kosher meal.

IV. Relief

(State briefly what you want the Court to do for you.)

I need a temporary injunction because they dont have kosher food here. and I would like some compensation for my suffering and for the Damaged Chumash.

SIGNED THIS 13th day of, may 2013.

Joseph L. Baerengarten^{III}
(original signature of plaintiff)

MRDCC #363641

550 E. madison St.

Balto, MD 21202
(address of plaintiff)